

SITE:	
BREAK:	1.9
OTHER:	vol. 1

EPA POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT FORM	<i>Identification</i>	
	State: AL	CERCLIS NUMBER: 7553
	CERCLIS Discovery Date: October 3, 2002	

1. General Site Information

Name: Andrew Knit		Street Address: 1416 Skyland Boulevard East			
City: Tuscaloosa		State: AL	Zip Code: 35405	County: Tuscaloosa	Cong. Dist:
Latitude: 33° 10' 14" N	Longitude: 87° 31' 04" W	Approximate Area of Site: ____ Acres 60,036 Square Feet		Status of site: <input type="checkbox"/> Active <input type="checkbox"/> Not Specified <input checked="" type="checkbox"/> Inactive <input type="checkbox"/> NA	

2. Owner/Operator Information

Owner: Spiller Investments Inc.			Operator: Charlie Trotman		
Street Address: P.O. Box 20824			Street Address: 2525 Bell Road		
City: Tuscaloosa			City: Montgomery		
State: AL	Zip Code: 35402-0824	Telephone:	State: AL	Zip Code: 36117	Telephone: 334-270-2727
Type of Ownership: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Country <input type="checkbox"/> Federal Agency <input type="checkbox"/> Municipal Name: _____ <input type="checkbox"/> Not Specified <input type="checkbox"/> State <input type="checkbox"/> Other _____ <input type="checkbox"/> Indian			How Initially Identified: <input checked="" type="checkbox"/> Citizen Complaint <input type="checkbox"/> Federal Program <input type="checkbox"/> PA Petition <input type="checkbox"/> Incidental <input type="checkbox"/> State/Local Program <input type="checkbox"/> Not Specified <input type="checkbox"/> RCRA/CERCLA Notification <input type="checkbox"/> Other _____		

3. Site Evaluator Information

Name of Evaluator: Anne F. Cross		Agency/Organization Alabama Department of Environmental Management	Date Prepared: July 2003
Street Address: 1400 Coliseum Boulevard		City: Montgomery	State: Alabama
Name of EPA or State Agency Contact: Humberto Guzman		Street Address: Atlanta Federal Center 61 Forsyth Street SW	
City: Atlanta		State: GA	Telephone: (404) 562-8942

4. Site Disposition (for EPA use only)

Emergency Response/Removal Assessment Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____	CERCLIS Recommendation: <input type="checkbox"/> Higher Priority SI <input type="checkbox"/> Lower Priority SI <input type="checkbox"/> NFRAP <input type="checkbox"/> RCRA <input type="checkbox"/> Other _____ Date: _____	Signature: Name (typed): Position:
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5. General Site Characteristics

Predominant Land Use Within 1 Mile of Site (check all that apply):

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Agriculture | <input type="checkbox"/> DOI |
| X Commercial | <input type="checkbox"/> Mining | <input type="checkbox"/> Other Federal Facility |
| X Residential | <input type="checkbox"/> DOD | |
| <input type="checkbox"/> Forest/Fields | <input type="checkbox"/> DOE | <input type="checkbox"/> Other _____ |

Site Setting:

- X Urban
☐ Suburban
☐ Rural

Years of Operation:

Beginning Year 1967

Ending Year 1984

☐ Unknown

Type of Site Operations (check all that apply):

☐ Manufacturing (must check subcategory)

- ☐ Lumber and Wood Products
☐ Inorganic Chemicals
☐ Plastic and/or Rubber Products
☐ Paints, Varnish
X Industrial Organic Chemicals
☐ Agricultural Chemicals
(e.g., pesticides, fertilizers)
☐ Miscellaneous Chemical Products
(e.g., adhesives, explosives, ink)
☐ Primary Metals
☐ Metal Coating, Plating, Engraving
☐ Metal Forging, Stamping
☐ Fabricated Structural Metal Products
☐ Electronic Equipment
X Other Manufacturing

- ☐ Retail
☐ Recycling
☐ Junk/Salvage Yard
☐ Municipal Landfill
☐ Other Landfill
☐ DOD
☐ DOE
☐ DOI
☐ Other Federal Facility _____
☐ RCRA

- ☐ Treatment, Storage, or Disposal
☐ Large Quantity Generator
☐ Small Quantity Generator
☐ Subtitle D
☐ Municipal
☐ Industrial

- ☐ "Converter"
☐ "Protective Filer"
☐ "Non- or Late Filer"

☐ Not specified

☐ Other _____

Waste Generated:

- X Onsite
☐ Offsite
☐ Onsite and Offsite

Waste Deposition

Authorized By:

- ☐ Present Owner
X Former Owner
☐ Present & Former Owner
☐ Unauthorized
☐ Unknown

Waste Accessible to the Public:

- ☐ Yes
X No

Distance to Nearest Dwelling, School, or Workplace:

0 Feet

6. Waste Characteristics information

Source Type:

(check all that apply)

- ☐ Landfill
☐ Surface Impoundment
☐ Drums
☐ Tanks and Non-Drum Containers
☐ Chemical Waste Pile
☐ Scrap Metal or Junk Pile
☐ Tailings Pile
☐ Trash Pile (open dump)
☐ Land Treatment
☐ Contaminated Ground Water Plume
(unidentified source)
☐ Contaminated Surface Water /
Sediment (unidentified source)
X Contaminated Soil

Source Waste

Quantity:

(include units)

Tier*:

General Types of Waste (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Metals | <input type="checkbox"/> Pesticides / Herbicides |
| X Organics | <input type="checkbox"/> Acids / Bases |
| X Inorganics | <input type="checkbox"/> Oily Waste |
| X Solvents | <input type="checkbox"/> Municipal Waste |
| <input type="checkbox"/> Paint/Pigment | <input type="checkbox"/> Mining Waste |
| <input type="checkbox"/> Laboratory / Hospital Waste | <input type="checkbox"/> Explosives |
| <input type="checkbox"/> Radioactive Waste | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Construction / Demolition Waste | |

Physical State of Waste Deposited

(check all that apply):

- | | | |
|--------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> Solid | <input type="checkbox"/> Sludge | <input type="checkbox"/> Powder |
| X Liquid | <input type="checkbox"/> Gas | |

* C = Constituent, W = Wastestream,
V = Volume, A = Area

A

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7. Ground Water Pathway

Is Groundwater Used for Drinking Water within 4 Miles: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Type of Drinking Water Wells Within 4 Miles (check all that apply): <input type="checkbox"/> Municipal <input type="checkbox"/> Private <input checked="" type="checkbox"/> None	Is there a suspected Release to Ground Water: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have Primary Target Drinking Water Wells Been Identified: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Enter Primary Target Population: _____ People	List secondary Target Population Served by Groundwater Withdrawn From: 0 - ¼ Mile N/A > ¼ - ½ Mile _____ > ½ - 1 Mile _____ > 1 - 2 Miles _____ > 2 - 3 Miles _____ > 3 - 4 Miles _____ Total Within 4 Miles _____
Depth to Shallowest Aquifer: _____ 78 _____ Feet Karst Terrain/Aquifer Present: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Nearest Designated Wellhead Protection Area: <input type="checkbox"/> Underlies Site <input type="checkbox"/> > 0-4 Miles <input checked="" type="checkbox"/> None Within 4 Miles	

8. Surface Water Pathway

Type of Surface Water Draining Site and 15 Mile Downstream (check all that apply): <input type="checkbox"/> Stream <input checked="" type="checkbox"/> River <input type="checkbox"/> Pond <input type="checkbox"/> Lake <input type="checkbox"/> Bay <input type="checkbox"/> Ocean <input checked="" type="checkbox"/> Creek	Shortest Overland Distance From Any Source to Surface Water: 1,468 Feet _____ Miles																				
Is There a Suspected Release to Surface Water: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Site is Located in: <input type="checkbox"/> Annual - 10-yr Floodplain <input type="checkbox"/> >10 yr - 100 yr Floodplain <input type="checkbox"/> >100 yr - 500 yr Floodplain <input checked="" type="checkbox"/> > 500 yr Floodplain																				
Drinking Water Intakes Located Along the Surface Water Migration Path: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Have Primary Target Drinking Water Intakes Been Identified: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Enter Population Served by Primary Target Intakes: _____ People	List All Secondary Target Drinking Water Intakes: <table border="1"> <thead> <tr> <th>Name</th> <th>Water Body</th> <th>Flow (cfs)</th> <th>Population Served</th> </tr> </thead> <tbody> <tr> <td>N/A</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td colspan="4">Total Within 15 Miles</td> </tr> </tbody> </table>	Name	Water Body	Flow (cfs)	Population Served	N/A	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	Total Within 15 Miles			
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N/A	_____	_____	_____																		
_____	_____	_____	_____																		
_____	_____	_____	_____																		
Total Within 15 Miles																					
Fisheries Located Along the Surface Water Migration Path: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Have Primary Targets Been Identified: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	List All Secondary Target Fisheries: <table border="1"> <thead> <tr> <th>Water Body/Fishery Name</th> <th>Flow (cfs)</th> </tr> </thead> <tbody> <tr> <td>Cypress Creek</td> <td><10</td> </tr> <tr> <td>Black Warrior River</td> <td>298</td> </tr> </tbody> </table>	Water Body/Fishery Name	Flow (cfs)	Cypress Creek	<10	Black Warrior River	298														
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8. Surface Water Pathway (continued)

Wetlands Located Along the Surface Water Migration Pathway:

☒ Yes

☐ No

Have Primary Target Wetlands Been Identified:

☐ Yes

☒ No

List Secondary Target Wetlands:

Water Body	Flow (cfs)	Frontage
Cypress Creek	< 10	4.16 miles
_____	_____	_____
_____	_____	_____

Other Sensitive Environments Located Along the Surface Water Migration Pathway:

☒ Yes

☐ No

Have Primary Targets Sensitive Environments Been Identified:

☐ Yes

☒ No

List Secondary Target Sensitive Environments:

Water Body	Flow (cfs)	Sensitive Environment Type
Cypress Creek	<10	End./Threatened Species
Black Warrior River	298	End./Threatened Species

9. Soil Exposure Pathway

Are People Occupying Residence or Attending School or Daycare on or within 200 Feet of Areas of Known or Suspected Contamination:

☐ Yes

☒ No

If Yes, Enter Total Resident Population:

People

Number of Workers Onsite:

☐ None

☒ 1 - 100

☐ 101 - 1,000

☐ >1,000

Have Terrestrial Sensitive Environments Been Identified on or Within 200 Feet of Areas of Known or Suspected Contamination:

☐ Yes

☒ No

If Yes, List Each Terrestrial Sensitive Environment:

10. Air Pathway

Is there a Suspected Release to Air:

☐ Yes

☒ No

Enter Total Population on or Within:

Onsite	70
0 - 1/4 Mile	268
>1/4 - 1/2 Mile	900
>1/2 - 1 Mile	3,794
>1 - 2 Mile	14,308
>2 - 3 Mile	19,886
>3 - 4 Mile	24,431
Total Within 4 Miles	63,657

Wetlands Located Within 4 Miles of the Site:

☒ Yes

☐ No

Other Sensitive Environments Located Within 4 Miles of the Site:

☒ Yes

☐ No

List All Sensitive Environments Within 1/2 Mile of the Site:

Distance	Sensitive Environment Type/Wetlands Area (acre)
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Onsite

0 - 1/4 Mile

> - 1/4 - 1/2 Mile End./Threatened Species